

5.0 Terms, Conditions, and Assurances

The applicant agrees to comply with the following regulations, requirements, policies, and documents for the entire period of any contract with the Milwaukee County Department on Aging.

1. The applicant will comply with all federal, state, and local laws and requirements relating to equal opportunity in employment and the delivery of services and will submit, as required below, Affirmative Action Plans and Civil Rights Compliance Action Plans that meet Equal Opportunity Requirements under the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Titles VI and XVI of the Public Service Health Act, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990, as amended, and other relevant federal laws, state statutes, and County Ordinances.
2. The terms of a Milwaukee County Department on Aging Purchase Agreement.
3. The relevant Milwaukee County Department on Aging Program/Service Guidelines or Specifications.
4. Milwaukee County Department on Aging Administrative Policies and Procedures.
5. All federal, state, and local laws and regulations pertaining to the funding or the provision of the proposed program or services.

The undersigned further offers the following specific assurances:

A. Environment, Licensure, and Accessibility

1. The proposed service site meets minimum standards of local Building, Fire, and Health Departments.
2. The proposed service site has adequate space and equipment to provide the proposed program or services.
3. Where state or local public jurisdiction requires licensure, certification, or permits for the provision of the proposed program or service, the applicant assures that it will possess all required licenses, permits, and certifications for the entire period of any contract with the Department on Aging.
4. The proposed service site will be accessible to older persons with disabilities.

B. Sponsorship and Sponsor Goals

1. The applicant will acknowledge the sponsorship of the Milwaukee County Department on Aging on all announcements of the proposed program or service, but will not attribute any statement to the Department without written clearance.
2. The applicant will not be in conflict with the stated goals and policies of the Milwaukee County Department on Aging.

C. Staffing

1. The applicant is willing to employ staff appropriate for the primary service population in need of the proposed program or service.
2. The applicant will not discriminate in its employment policies as to race, age, creed, sex, or national origin, and will, as appropriate, attempt to employ people 45 years of age and older.
3. The applicant will provide proper supervision for the proposed program or service and specify supervisory responsibilities.
4. The applicant will comply with the requirements of Wisconsin 1997 Act 27 and s. 48.685 and s. 50.065, Wis. Stats., including conducting employee background checks as may be required under state law.

D. Training

The applicant agrees to provide for, or participate in, such training as may be necessary to enable paid and volunteer project personnel to effectively provide and administer the proposed program or service.

E. Reporting and Record Keeping

1. The applicant will assist the Milwaukee County Department on Aging in meeting reporting and/or research requirements, including outcomes and outcome measures.
2. The applicant will use only the official forms provided by the Milwaukee County Department on Aging to submit required monthly reports on the proposed program or service. Any computer-generated substitute of official forms must be approved in advance by the Milwaukee County Department on Aging prior to use.

F. Coordination with Other Service Providers

The applicant assures that it will coordinate its proposed program or service with other service providers serving older adults in Milwaukee County, including senior centers and the Senior Meal Program.

G. Maintenance of Non-Federal Funding

The applicant assures that it will continue or initiate efforts to obtain funds from private sources and other public organizations to maintain the proposed program or service.

H. Equal Employment Opportunity Requirements

Based upon Section 56.17 of Milwaukee County General Ordinances, and relevant Federal and State laws and regulations, the applicant must, and assures that it will, comply with the following

requirements during the entire period of any contract with the Milwaukee County Department on Aging.

1. Affirmative Action Plan: Agencies that have fewer than 50 employees and a Milwaukee County contract are urged to voluntarily develop and keep on file an Affirmative Action Plan and a Civil Rights Compliance Action Plan. Agencies that have a Milwaukee County contract and have 50 or more employees are required to develop and/or update an Affirmative Action Plan. Plans should be submitted to the County Audit Compliance Manager, at City Campus, 2711 West Wells Street, 9th Floor, Milwaukee, WI 53208.

Information regarding basic statistics on population and labor force can be obtained from the Labor Market Analyst, Job Service, State Office Building, 819 North 6th Street, Milwaukee, WI 53203 (Tel. 227-4310).

2. Civil Rights Compliance Action Plan: Agencies that have a Milwaukee County contract shall have a Civil Rights Compliance Action Plan that ensures that no person shall, on the grounds of race, color, national origin, age, sex, religion, or handicap, be excluded from participation in or be subjected to discrimination in any program or activity funded, in whole or in part, by Federal and State funds. Copies of a sample plan that meets Wisconsin Department of Health Services requirements are available from the Department on Aging.
3. EEO-1 Report: Applicable to agencies that have a contract of \$50,000 or more and have 50 or more employees. An EEO-1 report is to be submitted annually on or before March 31 to the Joint Reporting Committee, P. O. Box 1480, Arlington, Virginia, 22210 (Tel: 703-841-9620); a copy must be sent to the County Audit Compliance Manager. Forms are available from the U. S. Department of Labor, Office of Federal Contract Compliance Programs.
4. Equal Employment Opportunity Certificate for Milwaukee County Contracts: Applicable to all agencies. Form is enclosed. Each applicant must sign and return this form with their proposal.
5. Equal Opportunity Policy Statement: Applicable to all agencies. Form is enclosed. Agencies must sign and post copies on bulletin boards in each facility operated under a Department on Aging contract.
6. Equal Employment Opportunity Poster: Applicable to all agencies. Agencies must post one in each facility operated under a Department on Aging contract.
7. Equal Employment Opportunity Requirements: Following are the equal opportunity requirements by which all contract agencies must abide:
 - a. No otherwise qualified person shall be excluded from participation in, be denied the benefits of, or otherwise be subject to discrimination in any manner on the basis of race, color, national origin, religion, sex, disability, or age. This policy covers eligibility for and access to service delivery and treatment in all programs and activities.

- b. No otherwise qualified person shall be excluded from employment, be denied the benefits of employment, or otherwise be subject to discrimination in employment in any manner or term of employment on the basis of age, race, religion, color, sex, national origin, ancestry, or handicap [as defined in Section 504 and the Americans with Disabilities Act (ADA)], physical condition, developmental disability [as defined in s. 51.01 (5)], arrest or conviction record (in keeping with provisions of s. 111.32), sexual orientation, marital status, or military participation. All employees are expected to support goals and programmatic activities relating to non-discrimination in employment.
- c. Should the applicant be awarded a contract by Milwaukee County, the applicant shall, during the period of that contract, post the Equal Opportunity Policy, the name of the Equal Opportunity Coordinator, and the discrimination complaint process in conspicuous places available to applicants and clients of services, and applicants for employment and employees. The complaint process will be Family Services and made available in languages and formats understandable to applicants, clients, and employees. The Department of Health Services will provide appropriately translated state-mandated brochures and forms for local distribution.
- d. The applicant agrees to comply with guidelines in the Civil Rights Compliance Standards and a Resource Manual for the Wisconsin Department of Health Services, its County Service Providers, and their Subcontractors for Equal Opportunity in Service Delivery and Employment, copies of which are available through the Department on Aging.
- e. The applicant agrees to cooperate with the Department on Aging and the Wisconsin Department of Health Services in developing, implementing, and monitoring corrective action plans that result from complaint investigations or other monitoring efforts.

I. Authorizations

- 1. The applicant authorizes the Department on Aging to contact other governmental agencies with which the applicant has contracted to determine:
 - a. If the amount and quality of contracted programs or services provided by the applicant have been satisfactory.
 - b. Whether the applicant has met all programming requirements under its contracts.
- 2. The applicant assures the Department on Aging that the applicant possesses the legal authority to submit a proposal to provide programs or services for the Department on Aging during 2014, and that its Board of Directors has authorized the filing of this proposal at its meeting of:

(Date of board meeting)

I hereby certify that the information in this proposal is true and correct, and that the program or service proposed herein is consistent with our organization's Articles of Incorporation and Bylaws and that submission of the proposal has been approved by a majority of the Board of Directors. Our organization further agrees to all of the above terms, conditions, and assurances and will submit all required reports and a certified financial audit for the years during which the organization has contracted to provide programs or services for the Department on Aging.

Name of Applicant

Representative: _____

Title of Applicant

Representative: _____

Signature of Applicant

Representative: _____

Date of Signature: _____